


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

Jan 28, 2008 08:00 AM
Secretary of State

DOCUMENT # N03339 1. Entity Name LAKE WALES FIREFIGHTERS ASSOCIATION, INC.	
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Principal Place of Business 253 W CENTRAL AVE LAKE WALES, FL 33853	Mailing Address 253 W CENTRAL AVE LAKE WALES, FL 33853
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DO NOT WRITE IN THIS SPACE



01222008 No Chg-NP CR2E037 (4/06)

4. FEI Number 06-0134400	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent BROWN, JAMES G 253 W CENTRAL AVE LAKE WALES, FL 33853
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: <u>James G. Brown</u> <small>(Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing))</small>	DATE: <u>01-23-2008</u>

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BROWN, JAMES G 839 N. LAKESHORE BLVD LAKE WALES, FL 33853
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SCHELL, STEVE 31 PINE ST BABSON PARK, FL 32827
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POLSTON, MIKE 532 SOUTH 8TH ST LAKE WALES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DANFORD, MIKE 1184 S. LAKESHORE BLVD LAKE WALES, FL 33853
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/01/08-80060-012 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>James G. Brown</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: <u>01-23-2008</u> <small>Date Daytime Phone #</small>